

Erosion Control Permit Application



DEPARTMENT USE ONLY	
Permit no.:	
Date Received:	
Date Issued:	By:
Receipt #:	

City of Milwaukie	
6101 SE Johnson Creek Blvd., Milwaukie OR 97206	
Phone: 503-786-7613	Fax: 503-786-7612
Apply for permits on line www.buildingpermits.oregon.gov	
Inspections: 503-786-7575 or www.buildingpermits.oregon.gov	

CATEGORY OF CONSTRUCTION		
<input type="checkbox"/> 1 & 2 Family	<input type="checkbox"/> Commercial	<input type="checkbox"/> Multi-Family
<input type="checkbox"/> Accessory	<input type="checkbox"/> Other:	
GENERAL CONTRACTOR INFORMATION		
Business Name		
Address:		
City:	State:	Zip:
Phone:	Fax:	
CCB #:	METRO #:	
E-Mail Address:		
Name:		Date:
Signature:		
OWNER INFORMATION		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
E-Mail Address:		
<i>Owner installation / residential maintenance only: The actual installation will be made by me or the maintenance and repair made by my regular employee on the property I own as per ORS chapter 447.</i>		
Signature:		
OREGON REGISTERED ENGINEER (required for 5 or more acres of disturbed area) (DEQ 1200C REQUIRED)		
Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	
E-Mail Address:		
CERTIFIED PARTIES (necessary to obtain discount) (Certification required 4 hrs. training in erosion control every 2 yrs.)		
Name/Title:		Certification #:
Name/Title:		Certification #:
24 HR. / AFTER HOURS EMERGENCY CONTACT		
Name:		Phone:
Name:		Phone:

JOB SITE INFORMATION	
Job Address:	
City:	State: Zip:
Project Name:	
Description of work:	
Location and address where spoils leaving site will be taken (note: permits may be required):	
Site size: sq. ft/	Disturbed area: sq. ft / acre (Circle one)
Site runoff drains to (check one)	
<input type="checkbox"/> Catch Basin	<input type="checkbox"/> Pipe <input type="checkbox"/> Creek
Check one:	<input type="checkbox"/> Private <input type="checkbox"/> Public right-of-way
Est. start date	Est. completion date
EROSION / SEDIMENTATION CONTROL (ESC) MEASURES	
Minimum ESC requirements during construction:	
<input type="checkbox"/> Sedimentation facilities	
<input type="checkbox"/> Stabilized construction entrance	
<input type="checkbox"/> Perimeter runoff control	
<input type="checkbox"/> Clearing and grading restrictions	
<input type="checkbox"/> Cover practices	
<input type="checkbox"/> Construction sequence	
<input type="checkbox"/> Stabilize exposed surface	
<input type="checkbox"/> Remove and restore temporary ESC facilities	
<input type="checkbox"/> Clean and remove all silt and debris	
<input type="checkbox"/> Ensure operation of permanent facilities	
Other (describe)	
<i>Plan for erosion control prepared and submitted in accordance with "Technical Guidance Handbook." Erosion control plan drawing as required, has plan construction notes complete, including emergency phone number, scheduling / staging for installation and removal of erosion control measures, and applicable standard notes.</i>	
<i>I have read and will comply with the above and will construct and maintain ESC measures as necessary to contain sediment on the construction site</i>	
Signature:	
Print Name:	
Permit fee:	\$
Certification discount:	\$
Performance bond (if required)	\$
TOTAL	\$